

FPA5R22 (06-04)

Approved for use through 07/31/2006. GMB 0657-0051
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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) P1396																								
Application Number	10/046,062	Filed January 11, 2002																								
For Tri-Mode Over-Voltage Protection and Disconnect Circuit Apparatus and Method																										
Art Unit 2836		Examiner Boris Benenson																								
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):</p> <table style="margin-left: auto; margin-right: auto;"> <thead> <tr> <th></th> <th style="text-align: center;"><u>Fee</u></th> <th style="text-align: center;"><u>Small Entity Fee</u></th> <th></th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/> One month (37 CFR 1.17(a)(1))</td> <td style="text-align: center;">\$110</td> <td style="text-align: center;">\$55</td> <td>\$ _____</td> </tr> <tr> <td><input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td> <td style="text-align: center;">\$420</td> <td style="text-align: center;">\$210</td> <td style="text-align: center;">\$ 420.00</td> </tr> <tr> <td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td> <td style="text-align: center;">\$950</td> <td style="text-align: center;">\$475</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td> <td style="text-align: center;">\$1480</td> <td style="text-align: center;">\$740</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td> <td style="text-align: center;">\$2070</td> <td style="text-align: center;">\$1035</td> <td>\$ _____</td> </tr> </tbody> </table> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input checked="" type="checkbox"/> Payment by credit card. Form PTO-2036 is attached.</p> <p><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number _____ . I have enclosed a duplicate copy of this sheet.</p>				<u>Fee</u>	<u>Small Entity Fee</u>		<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$110	\$55	\$ _____	<input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$420	\$210	\$ 420.00	<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$950	\$475	\$ _____	<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1480	\$740	\$ _____	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2070	\$1035	\$ _____
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Provide credit card information and authorization on PTO-2036.

I am the applicant/inventor.

assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).

09/21/2004 TBL1L2 00000001 10046062 Attorney or agent of record. Registration Number 26,394
01 FC:1252 420.00 DP
 attorney or agent under 37 CFR 1.34.
Registration number if acting under 37 CFR 1.34 _____

C. Kelley Crossman
Signature

September 17, 2004

Date

C. Kelley Crossman

Typed or printed name

(831) 669-8800

Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Total of 1 forms are submitted.

This collection of information is required by 37 CFR 1.136(a). This information is required to obtain or retain a benefit by the public which is to be (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 6 min. to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, USPTO, 1401 L Street, N.W., Washington, D.C. 20531. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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